FORM D

MAR 27 2009

THOMSON REUTERS

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Temporary

FORM D

NOTICE OF SALE OF SECURITI PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

	OMB APPROVAL
	OMB Number: 3235-0076 Expires: March 31, 2009 Estimated average burden hours per response 16.00
1	SEC USE ONLY

DATE RECEIVED

Serial

Prefix

Name of Offering (check if this is an amendment and name has changed, and indicate change.)										
Turner Global Consumer, L.P.										
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE										
Type of Filing: New Filing Amendment										
A. BASIC IDENTIFICATION	DATA									
Enter the information requested about the issuer										
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.)									
Turner Global Consumer, L.P.		1 / E S (
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Incli	1 0 10 11 12 13 13 14 15 15 15 15 15 15 15								
1205 Westlakes Drive, Suite 100, Berwyn, PA 19312	(484)329-2425									
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Inclu	T DE DIAL BENNE TEKK BETTER INNER BUTEL TEKK BETT E TYBE 1991								
(if different from Executive Offices)	· · · · · · · · · · · · · · · · · · ·	09036802								
Brief Description of Business: To operate as a private unregistered investment part	nership.									
Type of Business Organization										
corporation imited partnership, already formed		other (please specify):								
business trust limited partnership, to be formed										
Month Year	•									
Actual or Estimated Date of Incorporation or Organization: 1 2 0 4	🛛 Actual 🔲 Estimate	d								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:										
CN for Canada: FN for other foreign in	indiation)	DIA								

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDE	ENTIFICATION DATA		
2. Enter the information requested for the				
• Each promoter of the issuer, if the	•	•		
 Each beneficial owner having the p of the issuer; 	oower to vote or dispose, o	or direct the vote or dispos	ition of, 10% or	more of a class of equity securities
Each executive officer and directorEach general and managing partner	•	of corporate general and m	nanaging partner	s of partnership issuers; and
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Willistown Partners, L.L.C.			·	
Business or Residence Address (Number 1205 Westlakes Drive, Suite 100, Berwyn,		Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		☐ Director , L.L.C.	☐ Managing Partner
Full Name (Last name first, if individual)				
Turner, Robert E.		,		·
Business or Residence Address (Number	and Street, City, State, Zip	Code)		•
1205 Westlakes Drive, Suite 100, Berwyn,	PA 19312			
Check Box(es) that Apply: Promoter	Beneficial Owner		Director rs, L.L.C.	Managing Partner
Full Name (Last name first, if individual)				
Turner, Mark D.				
Business or Residence Address (Number a	and Street, City, State, Zip	Code)		
1205 Westlakes Drive, Suite 100, Berwyn,	PA 19312 .			• .
Check Box(es) that Apply: Promoter	Beneficial Owner	Managing Member Of Willistown Partner	Director	☐ Managing Partner
Full Name (Last name first, if individual) McHugh, Christopher				
Business or Residence Address (Number	and Street, City, State, Zir	Code)		
1205 Westlakes Drive, Suite 100, Berwyn,				
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	Partner
Full Name (Last name first, if individual)				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

☐ Executive Officer ☐ Director

□ Director

□ Executive Officer

☐ Partner

☐ Partner

☐ Beneficial Owner

■ Beneficial Owner

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

Check Box(es) that Apply:

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Promoter

	•	•		B. II	NFORMAT	TION ABO	UT OFFE	RING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.											Yes	No ⊠
				\$250,0	000*							
											Ψ200,	<u> </u>
,											Yes	No
3. Does th	ie off eri ng p	ermit joint	ownership (of a single	unit?	••••••	***************************************	***************************************	•••••••	•••••		
a perso states, l broker Adviso person	ssion or sim n to be liste list the nam or dealer, or and/or G s who intro	illar remune ed is an asso e of the bro you may se eneral Par oduce pros	eration for so ociated perso oker or deal of forth the tner may a occtive inve	olicitation of on or agent er. If more information agree at the	of purchaser of a broker e than five (n for that b eir expense	s in connect or dealer r (5) persons broker or de and subje	tion with sa egistered w to be listed caler only.	iles of secur ith the SEC l are associa Not appl	rities in the and/or wit ated person licable, ho	offering. If the a state or as of such a wever, the	•	
run Name	(Last Haille	11151, 11 1110	ividuai)									
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zịp	Code)			,			
Name of A	ssociated B	Broker or De	ealer									·
C+-+ ! 11	Think Dans	. I lated ITe	- C-11-1		- C-II-IA D.	-1	 .		.			· · ·
												. All States
•				•			(DF)	[DC]	[F1] ·	[GA]	[HI]	[ID]
	=	-		=	=						[MS]	[MO]
						-	_				[OR]	[PA]
											[WY]	[PR]
i dii i diiio	(Cast Haine	, 1113t, 11 11td	ividuai)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	aler									
States in W	Vhich Perso	n Listed Ha	s Solicited (or Intends to	o Solicit Pu	rchasers			<u>.</u>			
						*******	*****************	***************************************	**************			☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA].	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	: Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De										
rame of A	Socialty D	TORCI OI DE	A4161						•			
States in W	/hich Person	n Listed Ha	s Solicited o	or Intends to	Solicit Pu	rchasers						
(Check "/	All States" o	or check ind	lividual Stat	es)	**************	•••••			•••••			☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [R]]	[NE]	[NV]	[NH] [NT]	[NJ] ITXI	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
IKII	ISCI	ISDI	1 1 1 1 1 1	1131	(LIT)	1711	IVAL	[WA]	rwvi	rwn	(WY)	[PR]

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold <u>\$</u> Equity......\$ \$ Common Preferred <u>\$</u> Partnership Interests \$30,000,000 \$ 443,429 Other (Specify _____)......\$ \$ 443,429 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors.... \$ 443,429 Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505..... Regulation A..... Rule 504..... Total...... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ Printing and Engraving Costs.... \$ Legal Fees..... \$ Accounting Fees \$ Engineering Fees \$ Sales Commissions (specify finders' fees separately)..... П 図 Other Expenses (identify) __miscellaneous organization and legal expenses _____ \$ 100,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Ø

\$ 100,000

Total.....

	C. OFFERING PRICE	, NUMBER	OF IN	NVESTORS,	EXPENSES .	AND US	E OF P	ROCEEDS	S	<u> </u>
	b. Enter the difference between the aggregate o and total expenses furnished in response to Part C proceeds to the issuer."	- Question	4.a. T	his difference	is the "adjust	ed gross				\$ 29,900,000
•	Indicate below the amount of the adjusted gross proof the purposes shown. If the amount for any purpose is left of the estimate. The total of the payments listed forth in response to Part C - Question 4.b above.	s not known,	furnish	n an estimate a	nd check the b	ox to the				
	Total in response to Fair C - Question 4.0 above.						O1	ments to fficers, ectors, &		Payments to
							Af	filiates		Others
	Salaries and fees		••••••		•••	🗆 <u>\$</u>				
	Purchase of real estate					🗆 <u>\$</u>	_			<u>\$</u>
	Purchase, rental or leasing and installation of	machinery an	ıd equi	pment		🗆 <u>\$</u>	_			<u>\$</u>
	Construction or leasing of plant buildings and	facilities			••••	🗆 \$				\$
	Acquisition of other business (including the va	alue of securi	ities in	volved in this			-			_
	offering that may be used in exchange for the									
	issuer pursuant to a merger)					🗆 <u>\$</u>	_			<u>\$</u>
	Repayment of indebtedness	•••••••				🗆 <u>\$</u>	_	•		<u>\$</u> .
	Working capital		•••••			🗆 <u>\$</u>				<u>\$</u>
	Other (specify): <u>investments in securities</u>					□ <u>\$</u>	_		\boxtimes	\$ 29,900,000
		<u>.</u>		<u> </u>			-		•	
		<u> </u>	-	•						
	Column Totals				***************************************	🗆 <u>\$</u>	_		Ø.	\$ <u>29,900,</u> 000
	Total Payments Listed (column totals added).	•••••	••••••	•••••		<i>.</i> .	⊠	\$ 29,9	00,00	0
		D. FED	ERAI	L SIGNATUI	RE	-				,
g	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accredi	urnish to the	U.S.	Securities and	Exchange Co	mmissior	is filed ı, upon	under Rule written req	e 505, ti juest of	he following its staff, the
s	uer (Print or Type)	Signature	7)	, 16			I	Date		
u	rner Global Consumer, L.P.		17	Jest 5	. Kume	^		3/12	, 2009	
a	me of Signer (Print or Type)							1		

END

Managing Member Of Willistown Partners, L.L.C., General Partner

Robert E. Turner